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# **Index to FAA Office of Aerospace Medicine Reports: 1961 Through 2012**

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16. Abstract  <b>An index to Federal Aviation Administration Office of Aerospace Medicine Reports (1964-2012) and Civil Aeromedical Institute Reports (1961-1963) is presented for those engaged in aviation medicine and related activities. The index lists all FAA aerospace medicine technical reports published from 1961 through 2012: chronologically, alphabetically by author, and alphabetically by subject.</b>					
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## HISTORICAL NOTE



*CAMI's 2012 staff. The original dedication of the CAMI building 50 years ago was celebrated by its current staff in a rededication day of tours and speeches. Ceremonies, in a format reminiscent of the 1962 dedication, were attended by the FAA Administrator and other distinguished guests.*

Below: Then-FAA Administrator Najeib Hallaby, speaking at the building dedication ceremony on October 21, 1962, delivered the keynote address.



Right: FAA Administrator Michael Huerta, speaking at the rededication ceremony on December 12, 2012. "For the past 50 years, CAMI has been at the nexus of aerospace medical research, education and certification," Administrator Huerta said. "CAMI is working to make sure that the human body can keep pace with the human spirit's desire to expand the envelope of flight. All of this is possible because of the men and women who keep this place running. The public service you exude, the professionalism for which you're known ... well, that comes from the deep seeds of character that



were sown long before you came to the FAA. Everywhere I look here at CAMI, I see a pride, a desire to go above and beyond," he added.





*A celebration commemorating the Institute's 50th anniversary in Oklahoma City, Oklahoma, was attended by (left-right) then-Acting Administrator Michael Huerta, Associate Administrator for Aviation Safety Peggy Gilligan, CAMI Director Melchor Antuñano, Mike Monroney Aeronautical Center Director Lindy Ritz, and Deputy Federal Air Surgeon James Fraser, reflected on highlights of medical research and the many educational programs and achievements made at CAMI over the last 50 years.*

“The Institute has certainly set the gold standard in its commitment to ensure the safety of every person involved in aviation—on the flight deck, in the cabin, control tower and maintenance bay,” Peggy Gilligan said. “All of us who fly are deeply grateful for their contributions.”

Over the last half century, CAMI has dealt with more than 20 million medical applications and currently manages the medical certificates for roughly 400,000 U.S. pilots each year.

CAMI staff manages aerospace medicine education, scientific research, and occupational and environmental health, in addition to supporting the FAA Academy and the Transportation Safety Institute.

CAMI's contributions to aviation safety span the entire range of human involvement in aviation

systems, from the identification and mitigation of medical and performance risk factors during flight to breakthroughs in crash safety design and aircraft evacuation. CAMI researchers create and apply aviation-specific medical knowledge to enhance aviation safety. CAMI's programs communicate vital aeromedical safety information to the civil aviation community.

Other contributions include drop-down oxygen masks, evacuation floor lights, and water survival techniques.

By using the latest medical technology to assess an airmen's medical fitness to fly and always putting safety first, CAMI has helped the FAA achieve the most flexible, pilot-friendly medical certification program in the world.

## HOW TO USE THE INDEX

### Organization

The Index is organized in three sections:

1. Chronological Index: a cumulative list of all research reports from 1961 through 2012.
2. Author Index: all contributing authors, in alphabetical order.
3. Subject Index: subjects, listed in alphabetical order.

Some examples are:

**11-3** DeWeese RL, Moorcroft DM, Taylor AM. Aviation child safety device performance standards review.

**Above:** This is an entry from the **Chronological Index** of research reports, shown in cumulative sequence.

**Knecht WR 02-20, 05-7, 05-15, 07-16, 08-6, 08-7, 10-1, 10-6, 10-13, 10-17, 11-5, 12-15**

**Above:** This is an entry from the **Author Index**, which lists all of the research reports prepared by an author or co-author.

### Flight attendants

**...fatigue, 07-21, 09-22, 09-24, 09-25, 10-22, 10-25, 11-16, 12-12**

**Above:** An example of entries in the **Subject Index**; refers to all reports that pertain to a specific topic.

### Report Numbers

**12-5 Chaturvedi AK, Sershon JL, Craft KJ, Cardona PS, Soper JW, Canfield DV, Dubowski KM, Whinnery JE, Leyva MJ, Aston CE, Blevins SM, Wright JE, Fraser AD, Kuntz DJ: Effects of fluid load on human urine characteristics related to workplace drug testing. ADA566817**

**Above:** The first numbers (12-5) refer to the year and chronological number of the report. This is an abbreviated portion of the official number given each report and is found in the upper left of the report's cover page. The full report number of "12-5" is DOT/FAA/AM-12/5. The "ADA566817" was appended to the report by the Defense Technical Information Center (DTIC). Keep the number system in mind when ordering from DTIC.

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[www.faa.gov/go/oamtechreports](http://www.faa.gov/go/oamtechreports)
- Defense Technical Information Center (DTIC). Abstracts and full text of most reports are available from the DTIC's Public Technical Reports Internet site. Reports may be searched by author, title, and keyword, as well as "ADA" number.  
<http://www.dtic.mil/dtic/search/tr/tr.html>

*"Aviation Safety Through the Development and Application of Aeromedical Knowledge"*





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